#### Minutes of the Health & Human Services Board & Committee

# Thursday, April 16, 2009

Chairs Farrell and Paulson called the meeting to order at 1:00 p.m.

**Board Members Present**: Citizen Members Dennis Farrell (Chair), JoAnn Weidmann, Dr. Peter Geiss, and Flor Gonzalez, and Supervisors Duane Paulson and Janel Brandtjen. **Absent**: Citizen Members Michael O'Brien and Joe Vitale, and Supervisor Jim Jeskewitz.

**Committee Members Present**: Supervisors Duane Paulson (Chair), Janel Brandtjen, Bill Zaborowski, Gilbert Yerke, and Kathleen Cummings. **Absent**: Pauline Jaske and Jim Jeskewitz.

Also Present: Legislative Policy Advisor Ann Olson, Legislative Policy Advisor Dave Krahn, Health & Human Services Director Peter Schuler, Adolescent & Family Services Manager Peter Slesar, Senior Financial Analyst Clara Daniels, Senior Financial Analyst Bill Duckwitz, Public Health Manager Nancy Healy-Haney, Epidemiologist Ben Jones, Public Health Nurse Kristine Sweet, and Criminal Justice Collaborating Council (CJCC) Coordinator Rebecca Luczaj. Recorded by Mary Pedersen, County Board Office.

# **COMMITTEE AGENDA ITEMS**

#### **State Legislative Update**

Krahn distributed copies of his updated state legislation chart. He advised Youth Aids and other items not funded by the Governor may be discussed today, if time permits, by the Joint Finance Committee (JFC). He noted that the JFC will be meeting for the next two to three months. Human Services is looking at funding cuts of about 5% and for Youth Aids which totals about \$10 million or \$5 million per year (biennial budget). It is hopeful that money will be restored for Youth Aids. Krahn indicated that Sen. Alberta Darling, a JFC member, will be appearing at Monday's Executive Committee meeting to talk about human services issues and the 911 issue.

Krahn referred to AB 152 and SB 108 (companion bills) to which staff are opposed. Mental Health Center staff could not mandate, in emergency situations, thate mployees work overtime. According to Clinical Services Manager Mike DeMares, this does not occur often but it could cause problems.

Krahn said he is working closely with Adolescent & Family Services Manager Peter Slesar on SB 149 through SB 153, all of which Slesar supports. Krahn advised he will be contacting District Attorney Brad Schimel who only supports SB 153.

## **Approve Minutes 3/26/09 and 4/2/09**

MOTION: Cummings moved, second by Yerke to approve the minutes of March 26. Motion carried 5-0.

MOTION: Yerke moved, second by Cummings to approve the minutes of April 2. Motion carried 5-0.

# **Meeting Approvals**

MOTION: Cummings moved, second by Brandtjen to approve mileage for any committee members wanting to attend the Wisconsin County Human Services Association (WCHSA) Conference May 6-8, 2009 at the Chula Vista Resort in Wisconsin Dells. Motion carried 5-0.

MOTION: Cummings moved, second by Brandtjen to approve attendance for any committee members wanting to attend the Waukesha County Annual Family Caregiver Conference on April 21 at the Country Springs Hotel and Conference Center. Motion carried 5-0.

## **Future Agenda Items**

• Discuss the Possibility of Soliciting Funds for the Immunization Clinic (Brandtjen, Paulson)

#### Announcements

Cummings said she attended the National Public Health Performance Standards Assessment at WCTC on April 7. She felt this one ran much better than the last one.

Yerke explained Community Development Block Grant (CDBG) funding mechanism changes. He advised the number of contracts to receive CDBG funding this year will total about 50, down from about 60 in previous years. He suggested that human services related recommendations/priorities be forwarded to CDBG Coordinator Glen Lewinski.

# **BOARD AGENDA ITEMS**

## **Approve Minutes 3/26/09 and 4/2/09**

MOTION: Paulson moved, second by Gonzalez to approve the minutes of March 26. Motion carried 6-0.

MOTION: Paulson moved, second by Weidmann to approve the minutes of April 2. Motion carried 6-0.

## **Future Agenda Items**

• Discuss the Possibility of Soliciting Funds for the Immunization Clinic (Brandtjen, Paulson)

## **COMMITTEE AGENDA ITEMS**

# Ordinance 164-O-007: Repeal and Recreate Section 4-110(C) 1 of the Waukesha County Code of Ordinances

Paulson briefly explained this ordinance which is housekeeping related. The creation of the Aging and Disability Resource Center (ADRC) resulted in the elimination of the Department of Senior Services, the Commission on Aging, and the Long Term Care Support Committee. This ordinance modifies the County Code of Ordinances to reflect these changes.

Schuler advised that the State and County have agreed that the Mental Health Advisory Committee will oversee certain Community Options Program (COP) funding issues, instead of having to create a new committee for this purpose due to the elimination of the Long Term Care Committee.

MOTION: Cummings moved, second by Brandtjen to approve Ordinance 164-O-007. Motion carried 5-0.

## **COMBINED AGENDA ITEMS**

#### **Juvenile Center Federal Stimulus Grant**

Slesar said they would like to pursue U.S. Department of Agriculture grant funds as part of the stimulus program. This is part of the meals and equipment programs and are designed to help improve safety of meals for students. The Juvenile Center is considered a school program and he believes they would be eligible.

They are hoping to replace the existing stove. The current unit is not large enough to handle all the meals at the same time so there are issues of food safety and keeping meals at the proper temperature. They also want to replace the carts which are used to transport meals from the jail to the Juvenile Center. These carts are not designed for exterior transportation. They have smaller wheels and the insulation is not suitable which again adds to the meal temperature issue. Slesar noted this is a good opportunity to replace the current stove which is about ten years old.

Slesar advised the grant would be for about \$3,100 for two carts and a stove and the application deadline is May 11. This will not involve any County match.

MOTION: Yerke moved, second by Zaborowski that the committee supports this grant application. Motion carried 5-0.

MOTION: Weidmann moved, second by Paulson that the board support this grant application. Motion carried 6-0.

#### **Public Health Governance Essential Service #8**

This governance standard states that the governing body is responsible for assuring competence of the local health department workforce, the availability of workforce training programs for both the workforce personnel and members for the governing body, and the availability of leadership development programs for those charged with administrative and executive roles. To accomplish this, the governing body: 1) assures licensing and credentialing of local health department personnel, including both paid and volunteer workers; 2) establishes and oversees the implementation of policies designed to assure improvements in workforce, management, and leadership quality; 3) assesses and facilitates access to national, state, and local resources available for workforce instruction, leadership development and continuing education; 4) provides for the training and continuing education of the board or governing body; and 5)

reviews the current workforce, including attention to workforce training and education programs, and workforce assessment.

Healy-Haney said this standard addresses whether or not we have the proper license and credentials to work in a health department. Also, do we offer them opportunities to take advantage of national, state, and local resources for continuing education? Healy-Haney said in order to meet this particular service, they produce the licenses and documentation for all of their staff. The Public Health Division employs 18 public health nurses who are currently licensed with the State of Wisconsin. The Environmental Health Division holds State of Wisconsin agent status and 14 environmental health sanitarians hold current State of Wisconsin certificates of registration. Thirty-one out of thirty-nine public health employees have had basic incident command system training and six employees have advanced emergency operations command training. OSHA training is carried out every May. All Public Health Division first responders must practice service delivery in full Personal Protective Equipment. Four public health supervisors are scheduled for FEMA training in June of 2009.

#### **Public Health Update**

Healy-Haney said they sent a team from the Milwaukee-Waukesha Consortium to the University of North Carolina Management Academy for Public Health. The academy is designed to help public health professionals learn how to create business plans, be cost effective, outcome driven, and make every dollar count in terms of programming. Two of her staff members, including Jones, attended the last session and won a national blue ribbon award for their project. Healy-Haney noted these awards are very difficult to win and she is very proud of her staff. They not only received this award but they received every award available including the faculty award, peer award, management choice award, and the best content award meaning their project was the best in the nation. She noted this is similar to a master's thesis. There is a graduation and not everybody makes it through. It involves a lot of hard work and quite a bit of research and effort.

Healy-Haney said the National Performance Standards was held on April 7 and there was an overwhelming response from people who wish to participate. They continue to receive a tremendous amount of positive feedback from the community and she believes they did well in terms of the general nation. There are things they can improve on and they will learn more and keep going forward. Some of the information will be used to put together a community health improvement plan.

## **Presentation on Public Health Preparedness**

Jones gave a PowerPoint presentation on public health preparedness. The Public Health Emergency Plan (PHEP) is used to respond to acts of bioterrorism, infectious disease, and other public health threats and emergencies including chemical, biological, radiological, nuclear, and explosive incidents. The PHEP is integrated with other emergency response partner's plans. It outlines critical public health responses including isolation and quarantine, legal issues, risk communication, mutual aid, personal protective equipment, mass clinic operations, etc.

The Cities Readiness Initiative (CRI) is a program to aid cities in increasing their capacity to deliver medicines and medical supplies during a large-scale public health emergency such as a bioterrorism attack or nuclear incident. The Milwaukee Metropolitan Statistical Area, which

includes Waukesha County, is one of 72 funded regions or cities that must be able to receive and distribute Strategic National Stockpile assets and deliver mass medications to the entire population within 48 hours of event recognition. Jones went on to review CRI methods of distribution.

The Mass Clinic Plan is an annex to the Milwaukee/Waukesha County PHEP. This involves distributing medical supplies and pharmaceuticals from local inventory, the Interim Pharmaceutical Stockpileand/or the Strategic National Stockpile to a given population during a biological agent release or infectious disease outbreak. It utilizes the Incident Command System to ensure consistent response among response partners. For example, this may be used during an anthrax attack to distribute antibiotics or during a pandemic flu to administer vaccine.

The Wisconsin Pharmaceutical Stockpiles (WPS) are strategically placed around the state and can be deployed within four hours of a request. The Strategic National Stockpile (SNS) is a national repository of antibiotics, chemical antidotes, etc. They would be delivered to one of five warehouses in Wisconsin after a federal decision to deploy. It is a federal responsibility to deliver the assets, a state responsibility to distribute the assets, and a local responsibility to dispense the assets. The SNS has a commitment to arrive in 12 hours or less with pharmaceuticals and other medical equipment, continue to provide this support for as long as it is needed, constantly update stock, buy what is needed from the private sector if it is not stocked, and provide assistance in planning for and using the material the SNS provides.

Jones reviewed the Pandemic Influenza Plan which is also an annex to the PHEP. It is a locally specific plan intended to guide the development of procedures, prepare staff, and establish a state of readiness in case of an influenza pandemic. The plan follows the Center for Disease Control, the U.S. Department of Health and Human Services, and the Wisconsin Division of Public Health Guidance. This can be viewed online at <a href="www.waukeshacounty.gov/pandemicflu">www.waukeshacounty.gov/pandemicflu</a>. Each section is broken down by period with specific phase actions including command and control, surveillance, health care planning, disease control and prevention, risk communication, vaccine distribution, etc.

#### **Alcohol Treatment Court Fee Implementation**

Luczaj and Schuler were present to discuss this issue. Copies of "Alcohol Treatment Court Fee Workgroup" were distributed which included information on workgroup membership and purpose, overview of the proposed 5-tier income-based fee model, timeline, etc.

Schuler said during last year's budget process, the Alcohol Treatment Court was provided target dollars to continue for 2009. This is because the grant money was not adequate to cover the full year. The Alcohol Treatment Court Fee Workgroup was established to determine a fee scale. Luczaj said this was not an easy task, however, they ultimately came up with a five-tier model based on fee models currently being used in Health & Human Services. They wanted the fee scale to be as fair as possible and they were careful not to exclude anyone from being able to participate in the program.

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The fee scale will begin in June of this year and the monthly fee for a family making between \$0 and \$11,000 (indigent) will be \$25; between \$11,001 and \$30,000 - \$50; between \$30,001 and \$50,000 - \$75; between \$50,001 and \$75,000 - \$100; and over \$75,000 - \$200.

Luczaj said they believe they can generate about \$50,000 in revenues in 2010 although there are some variables, of course. They were, however, conservative in their estimates and they think they can make up for \$45,000 gap in 2010 which will be due to a loss of federal funding.

Health & Human Services staff will do the income assessments for individuals participating in the program. Previous year income taxes and current pay stubs will be used to assess fees. If a client's income changes, they need to come to Health & Human Services to get their fee reassessed. For those who refuse to provide income documentation, they will be assessed the \$200 fee.

Luczaj said this fee scale will go before the Criminal Justice Collaborating Council's Executive Committee on Monday for final approval and she does not anticipate any problems.

MOTION: Cummings moved, second by Brandtjen that the committee supports the fee model although recommends that there be a sixth-tier for higher incomes. Motion carried 5-0.

MOTION: Gonzalez moved, second by Brandtjen that the board supports the fee model although recommends that there be a sixth-tier for higher incomes. Motion carried 6-0.

MOTION: Yerke moved, second by Cummings to adjourn the committee at 3:10 p.m. Motion carried 5-0.

MOTION: Weidmann moved, second by Geiss to adjourn the board at 3:10 p.m. Motion carried 6-0.

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Respectfully submitted	Approved on:
Respectium v subilifica.	Approved on.

Kathleen M. Cummings Secretary